

Серед багатьох сучасних філософів і релігієзнавців домінує уявлення, що духовність, перш за все, пов'язана з релігійністю. Але, як свідчить практика, світові і національні релігії завжди орієнтували на любов до Бога і віддане служіння йому, на любов та служіння його творінням, тобто людям. Іще у Давньому Китаї етика Конфуція орієнтувала на добродійність і глибоку повагу до себе та інших, але вважалось, що на це здатні лише повноцінні, «ідеальні люди», які «не роблять іншим того, чого собі не бажають». У період європейського середньовіччя теж пропонувався «золоте правило моральності» – «не роби іншому того, чого не хочеш, щоб інший робив тобі». Отже, релігія, взагалі релігійні установи, священні книги використовували мораль як засіб творення людяності, гуманності, що має йти від Бога. Таким чином, духовність особистості, на наш погляд, може вимірюватись рівнем її моральної культури.

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## **PSYCHOLOGICAL DETERMINANTS OF MENTAL HEALTH AND SOCIAL ADAPTATION – THE ROLE OF INNER MULTIPLICITY AND DIALOGICAL COMPETENCIES IN FACILITATING PSYCHOSOCIAL ADJUSTMENT**

The field of clinical psychology has undergone substantial changes within the last 20 years. This evolution reflects advances made in the science of clinical psychology and related disciplines, and responds to social demands and changes the world is currently undergoing. A field that was originally preoccupied with understanding and treatment of mental disorders, has lately broaden its horizons to not only consider a pathogenic orientation, but also a salutogenic one, focused majorly on human resources and strengths. This expansion of interest resulted in an increased awareness of factors contributing to mental health and proper social adaptation. It is becoming increasingly pronounced that such focus of attention is advantageous as prevention is one of the most effective ways to reduce the burden of the disease and simultaneously it is cost-effective as many interventions often become self-financing over time, saving public expenditure [1]. Knowledge on mechanisms that protect mental health and foster stress resilience is not only useful in clinical setting. More and more often interventions and promotion programs are developed for different recipients as well – parents, pupils, employees and elderly people – all with the aim of enhancing participants resources, improving their well-being and keeping them healthy in times of difficulty.

Another noticeable change that one could observe is a gradual departure from the assumption on a monolithic nature of the Self [2] and turning to the thesis of multiplicity of self structure or self-concept pluralism [3,4]. The idea is based on a notion that the psychological life is not organized by the mind as an entirety, but by multiple autonomic structures (mind modules, schemas, voices, I-positions, subpersonalities), each of which generates different emotional and physiological reactions, as well as different motives, thoughts, behaviors and beliefs about oneself and the others [3,4,5]. In these approaches a person “is conceptualized as a plurality of qualitatively distinct selves” [4].

Theories based on a monolithic vision of personality assume that psychological health is mostly related to having a coherent and well-integrated self [6,7] and majority of mental health problems are regarded as a results of the discrepancies and contradictions between either aspects of the mind or acting tendencies [8,9]. Hence self pluralism, incoherence or dissociation is being related to maladjustment [10]. On the other hand approaches rooted in inner multiplicity idea adopt an assumption that a high degree of self-complexity promotes health and provides for a better quality of life as it enriches self-understanding and broadens the scope of alternative ways of dealing with life adversities [11]. High diversity in a personality system is said to allow to approach a problem from different perspectives, expand the understanding of external reality and thus helps to open up and search for the most fitting solutions. Studies found that the number of self aspects an individual is aware of directly conditions the flexibility of behavioral repertoire when facing a problematic events [4] and is positively related to personal adjustment, buffering of stress or promoting coping [12, 13]. It should be underlined however that some research results pointed at negative consequences of self multiplicity as well. For instance it was found that a self-concept pluralism is positively related to levels of anxiety and depression [14] and implies a higher cognitive load [4].

As presented results seem somewhat inconsistent, in order to understand the role of inner multiplicity in facilitating personal adjustment more profoundly, one should examine the interrelations between inner selves as well. Such opportunity is provided within dialogical self theory authored by H. Hermans, which enriches the reflection on self pluralism with a discursive and dynamic (dialogical) dimension. This theory explains the self as a dynamic multiplicity of different, relatively autonomous and mutually influencing I-positions, which are constantly engaged in a process of dialogical interchange [15]. Due to the fact that I-positions have agent-like qualities – they are emotionally driven, have their own specific memories, wishes, motives, interests, thoughts, stories and may temporarily take control of person’s actions – each I-position is conceived as an autonomous thought

and meaning making center. The same person takes numerous different stances – presents different points of views and experiences various feelings – depending on which I-position is taken. I-positions stem from socialization process in which discourses and social relations connected to them are internalized one after another [16, 17]. Different I-positions produce therefore unique voices and also may relate to each other – they may agree, disagree, ask questions, support or contradict, approve or even ridicule one another [15]. Thus, mental life is conceptualized as a series of internal multivoiced dialogues that represent external multivoiced dialogues encountered by the person throughout the life. By this means the DST develops the concept of polyphony, acknowledging that the mind is more than a sum of a variety of voices but it emerges from the dialogical exchange between them [17]. Dialogues are responsible for a person's ability to see possessing different perspectives, needs and desires and their modification and execution. On a structural level, dialogues play an integrative role, providing linking for all the I-positions which exist in the space of the self. Thanks to them the mutual realtions between I-positions (even the ones which are opposite or rarely given voice) are established, which protects the self against fragmentation. Apart from dialogues, integration and continuity in the dialogical self is maintained by the meta-position, which gives a person a unique meta perspective, enabling perceiving the self as a totality.

The model of psychological health which stems from the dialogical self theory tenets is connected to the idea of inner democracy [15]. It is a vision of a society consisting of many I-positions ready to engage in a dialogue and make decisions according to the democratic rules. This form of the mind organization serves the situation in which any I-position important for the occurring situation is given a voice and is heard by others, and its perspective becomes a part of a person's answer to the situational requirements. Thus, the decisions one makes can take account of multiple interests and needs and be at the same time adequate to the outside world. Drawing on above stated notions, it is possible to distinguish four conditions of proper personal adaptation [5, 18, 19]. First, one needs to have *a sufficient variety of I-positions* which can provide the flexibility of behavior and enable coping with different problems of today's complex and dynamically changing world. Too few I-positions leave a person with few coping strategies. Secondly, *a conscious access to a variety of I-positions* adequate to circumstances serves adaptation better than the mere number of I-positions. Therefore it is more beneficial for a person to know which tools are available and if they can be used in a particular situation than to have a wide range of them. Psychological health depends also on *the ability of the I-positions to enter dialogues*, therefore the possibility of I-positions to see

other I-positions is a key element to negotiations of meanings. It is beneficial if the I-positions recognize the points of view of each other and can engage in a dialogue which takes account of this variety of perspectives and particularly the differences among them as it provides coordination between different parts of the self, contributing to sense of coherence and continuity. Last but not least an existence of *a properly operating meta-position* which manages other I-positions in order to find new effective solutions and bring the sense of coherence is also adaptive.

It is worth to notice that the indicated variety of I-positions does not unconditionally result in better adaptation. What is important is the ratio of roles the person has to take to the complexity of the environment one lives in. A single countryman living in a small cottage and devoted to farming does not need as wide variety of inner I-positions as a corporate woman who lives in a capital and mothers a kindergarten child and a teenager. The environment of these two people requires a different degree of inner complexity, the knowledge of different discourses and thus a different level of behavioral flexibility. It is a disadvantageous when the variety of I-positions is much poorer than a complexity of the environmental requirements [5].

The here described conditions of health seem interconnected. The diversity of the available I-positions depend on their ability to enter dialogue and the operating of meta-position. In this context a narrower repertoire of I-positions supported by a greater ability to establish dialogical relations and a strong meta-position can be more adaptive than a wide repertoire but accompanied by a limited ability to dialogue and poor metacognitive abilities [19].

The significance of inner multiplicity and dialogical competencies becomes even more clearer if we take into account the complexity of the world we live in, globalization and an increasing pace of changing circumstances and environments. Contact with people who have different world views and belief systems, identify with various alternative social groups and come from numerous cultures and countries is becoming an aspect of the everyday life of many people. In order to adapt to such environment it is beneficial to keep open to diversity and multivoicedness, be able to react flexibly, engage in many forms of dialogues and cope well with uncertainty [20].

**References:** 1. Champion, J., Bhui, K. & Bhugra, D. (2012). European Psychiatric Association (EPA) guidance on prevention of mental disorders. *European Psychiatry*, 27, 2, 68–80. 2. McCrae, R., Terracciano, A. & 79 Members of the Personality Profiles of Cultures Project (2005). Personality Profiles of Cultures: Aggregate Personality Traits. *Journal of Personality and Social Psychology*, 89, 407–425. 3. Cooper, M. & Rowan, J. (1999). Introduction: Self-plurality – the one and the many. In J. Rowan, &

M. Cooper (Eds.), *The Plural Self. Multiplicity in Everyday Life* (pp. 1–11). London: The SAGE Publication.

4. Trzebińska, E., & Dowgiert, A. (2005). Polipsychizm: pożytki i koszty związane z wielowymiarową tożsamością. *Przegląd Psychologiczny*, 1, 75–94.

5. Gabińska, A., Zalewski, B., Szymczyk, B., Suszek, H. & Jędrasik-Styla M. (2012). Mechanisms of Mental Health and Mental Disorders in the Light of the Dialogical Self Theory. *Annals of Psychology*, 4, 117–136.

6. Lecky, P. (1945). *Self-consistency: A theory of personality*. New York: Island.

7. Rogers, C. (1959). *A Theory of Therapy, Personality and Interpersonal Relationships as Developed in the Client-centered Framework*. In S. Koch (Ed.), *Psychology: A Study of a Science*. Vol. 3: Formulations of the Person and the Social Context. New York: McGraw Hill.

8. Altrocchi, J. (1999). Individual differences in pluralism in self-structure. In J. Rowan, & M. Cooper (Eds.), *The Plural Self. Multiplicity in Everyday Life* (pp. 168–182). London: The SAGE Publication.

9. Emmons, R. A. (1999). *The Psychology of Ultimate Concerns. Motivation and Spirituality in Personality*. New York: The Guilford Press.

10. Laing, R. D. (1965). *The divided self*. London: Penguin.

11. Trzebińska, E. & Gabińska, A. (2008). Inner Multiplicity and Mental Health: A soundness of internal voices, *Studia Psychologica UKSW*, 8, 215–228.

12. Linville, P.W. (1987). Self-Complexity as a Cognitive Buffer Against Stress-Related Illness and Depression. *Journal of Personality and Social Psychology*, 52, 663–676.

13. Showers, C. J., Abramson, L. Y. & Hogan, M.E. (1998). The Dynamic Self: How the Content and Structure of the Self-Concept Change with Mood. *Journal of Personality and Social Psychology*, 75, 478–493.

14. McReynolds, P., Altrocchi, J. & House, C. (2000). Self-pluralism: assessment and relations to adjustment, life changes, and age. *Journal of Personality*, 68, 347–380.

15. Hermans, H., Kempen, H., & Van Loon, R. (1992). The Dialogical Self. Beyond Individualism and Rationalism. *American Psychologist*, 47, 23–33.

16. Hermans, H. (1996). Voicing the self: from information processing to dialogical interchange. *Psychological Bulletin*, 119, 31–50.

17. Stemplewska-Żakowicz, K. (2002). Koncepcje narracyjnej tożsamości. Od historii życia do dialogowego Ja. In J. Trzebiński (Ed.), *Narracja jako sposób rozumienia świata* (pp. 81–113). Gdańsk: GWP.

18. Oleś, P. & Brygoła, E. (2011). Świadomość dialogowa – implikacje dla zdrowia. In M. Górnik-Durose & J. Mateusiak (red.), *Psychologia zdrowia: Konteksty i pogranicza* (s. 109–121). Katowice: Wydawnictwo Uniwersytetu Śląskiego.

19. Dimaggio, G., Hermans, H. J. M. & Lysaker, P. H. (2010). Health and adaptation in a multiple self. *Theory and Psychology*, 20, 379–399.

20. Hermans, H. J. M. & Dimaggio, G. (2007). Self, Identity, and Globalization in Times of Uncertainty: A Dialogical Analysis. *Review of General Psychology*, 1, 3, 31–61.